

AMENDED IN SENATE JUNE 6, 2013
AMENDED IN ASSEMBLY APRIL 18, 2013
AMENDED IN ASSEMBLY APRIL 9, 2013
CALIFORNIA LEGISLATURE—2013–14 REGULAR SESSION

ASSEMBLY BILL

No. 411

Introduced by Assembly Member Pan

February 15, 2013

An act to add Section ~~14029.91~~ 14029.92 to the Welfare and Institutions Code, relating to Medi-Cal.

LEGISLATIVE COUNSEL’S DIGEST

AB 411, as amended, Pan. Medi-Cal: performance measures.

Existing law provides for the Medi-Cal program, which is administered by the State Department of Health Care Services, under which qualified low-income individuals receive health care services. The Medi-Cal program is, in part, governed and funded by federal Medicaid Program provisions. Under existing law, one of the methods by which Medi-Cal services are provided is pursuant to contracts with managed care plans.

This bill would ~~require all Medi-Cal managed care plans to analyze their Healthcare Effectiveness Data and Information Set (HEDIS) measures, or their External Accountability Set (EAS) performance measure equivalent, by geographic region, primary language, race, ethnicity, and, to the extent data is available, by sexual orientation and gender identity, and to implement strategies to reduce identified disparities between members from different regions, with different primary languages, and of different races, ethnicities, sexual orientations, and gender identities. The bill would also require that these analyses~~

be reported to the State Department of Health Care Services annually and be made available to the public via the department's Internet Web site. This bill would further require all Medi-Cal managed care plans to link individual level data collected as a part of analyzing their HEDIS Healthcare Effectiveness Data and Information Set (HEDIS) measures, or their EAS performance measure equivalent, to personal patient identifiers in a manner that allows for an analysis of disparities in medical treatment by certain characteristics and to submit that data to the department annually. The department would be required to make the that individual level data available for research purposes, as specified. The bill would further require the department to stratify, in the aggregate, that data by certain characteristics and to develop a report, which would be published on the department's Internet Web site. The bill would also require the department to identify, based upon that data, any disparities in care provided to all Medi-Cal managed care enrollees on the basis of those characteristics, and notify Medi-Cal managed care plans of any disparities identified. If disparities in care are identified, the bill would require each Medi-Cal managed care plan to analyze its internal data to determine if that disparity in care is present among Medi-Cal managed care enrolled in its plan, and require the Medi-Cal managed care plan to develop and implement a quality improvement, as specified.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. ~~Section 14029.91 is added to the Welfare and~~
2 ~~Institutions Code, to read:~~
3 ~~14029.91. (a) (1) The department shall require all Medi-Cal~~
4 ~~managed care plans, including county organized health systems~~
5 ~~and plans contracting with the department to provide services~~
6 ~~pursuant to two-plan and geographic managed care models, to~~
7 ~~analyze their Healthcare Effectiveness Data and Information Set~~
8 ~~(HEDIS) measures, or their External Accountability Set (EAS)~~
9 ~~performance measure equivalent, by geographic region, primary~~
10 ~~language, race, ethnicity, and, to the extent data is available, by~~
11 ~~sexual orientation and gender identity in order to identify disparities~~
12 ~~in medical treatment between Medi-Cal managed care members~~
13 ~~from different regions, with different primary languages, and of~~

1 different races, ethnicities, sexual orientations, and gender
2 identities, and to implement strategies to reduce those disparities.

3 (2) ~~The results of the analyses prepared in accordance with this~~
4 ~~subdivision shall be reported to the department annually. The~~
5 ~~department shall make such analyses available to the public through~~
6 ~~the department's Internet Web site.~~

7 (b)

8 *SECTION 1. Section 14029.92 is added to the Welfare and*
9 *Institutions Code, to read:*

10 *14029.92. (a) The department shall require the plans described*
11 *in paragraph (1) of subdivision (a) all Medi-Cal managed care*
12 *plans, including county organized health systems and plans*
13 *contracting with the department to provide services pursuant to*
14 *two-plan and geographic managed care models, to link all*
15 *individual level data collected as a part of analyzing their HEDIS*
16 *Healthcare Effectiveness Data and Information Set (HEDIS)*
17 *measures, or their EAS performance measure equivalent, to patient*
18 *identifiers in a manner that allows for an analysis of disparities in*
19 *medical treatment by geographic region, primary language, race,*
20 *ethnicity, gender, and, to the extent data is available, by sexual*
21 *orientation and gender identity, and to provide that information to*
22 *the department annually. The department shall make this data*
23 *available, in a format that complies with the Health Insurance*
24 *Portability and Accountability Act of 1996, for research purposes*
25 *through a data use or business associate agreement.*

26 *(b) The department shall stratify, in the aggregate, all HEDIS*
27 *measures from the plans described in subdivision (a) by geographic*
28 *region, primary language, race, ethnicity, gender, and, to the extent*
29 *data is available, by sexual orientation and gender identity, in*
30 *order to identify disparities in the quality of care provided to*
31 *Medi-Cal managed care enrollees based on those factors. The*
32 *department shall develop a report with this data and publish the*
33 *report on the department's Internet Web site.*

34 *(c) (1) The department shall, based upon the data described in*
35 *subdivision (b), identify disparities in care provided to all Medi-Cal*
36 *managed care enrollees based upon the factors described in*
37 *subdivision (b), and notify those plans of any disparities identified.*

38 *(2) If the department identifies any disparities, a plan described*
39 *in subdivision (a) shall review their administrative data, including,*
40 *but not limited to, encounter and claims data, to assess whether*

1 *the disparities identified exist among the Medi-Cal managed care*
2 *enrollees enrolled in its plan.*
3 *(3) If, upon review of its administrative data, a plan described*
4 *in subdivision (a) identifies the same disparities identified by the*
5 *department among the Medi-Cal managed care enrollees enrolled*
6 *in its plan, the plan shall develop and implement a quality*
7 *improvement plan to address those disparities. The quality*
8 *improvement plan may be used to meet existing contractual*
9 *requirements to develop and implement a quality improvement*
10 *plan. A quality improvement plan developed and implemented*
11 *pursuant to this paragraph shall be provided to the department*
12 *and the department shall publish that plan on the department's*
13 *Internet Web site.*